Case 19-21620-GLT Doc 15 Filed 05/20/19 Entered 05/20/19 13:46:36 Desc Main Document Page 1 of 54

Fill in this info	rmation to identify your	case:			
Debtor 1	Andy Fang				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA		
Case number	19-21620				
(if known)					Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	149,999.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	25,780.28
	1c. Copy line 63, Total of all property on Schedule A/B	\$	175,779.28
Par	t2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	154,717.47
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	7,373.63
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	42,607.88
	Your total liabilities	\$	204,698.98
Par	t3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,580.09
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,242.22
<sup>2</sup> ar	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	hedules.
	■ Yes		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

5,654.63 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,373.63
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	7,373.63

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nk it fits best. Be as complormation. If more space is a swer every question.  Describe Each Resident	6A/B B: Property ist and describe items ete and accurate as paneeded, attach a separatement, Building, Land,	List an asset ossible. If two ate sheet to to or Other Real	Last Name  Last Name  ICT OF PENNSYLVANIA  Only once. If an asset fits in more than of married people are filing together, both a his form. On the top of any additional page.  Estate You Own or Have an Interest In lence, building, land, or similar property?	are equally responsible for s ges, write your name and cas	supplying correct
ebtor 2 pouse, if filing) First Nam nited States Bankruptcy C ase number  19-21620  Official Form 10  Chedule A/E each category, separately link it fits best. Be as complormation. If more space is a swer every question.  art 1: Describe Each Residue No. Go to Part 2.	6A/B B: Property st and describe items ete and accurate as preceded, attach a separateur.	Middle Name TERN DISTR  List an asset possible. If two ate sheet to the or Other Real	Last Name  ICT OF PENNSYLVANIA  only once. If an asset fits in more than of married people are filing together, both a his form. On the top of any additional page.  Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	amended filing  12/15  In the category where you supplying correct
pouse, if filing)  First Name Price Name Pri	6A/B B: Property st and describe items ete and accurate as preeded, attach a separatement, and,	List an asset possible. If two ate sheet to the or Other Real	only once. If an asset fits in more than commarried people are filing together, both a his form. On the top of any additional page	are equally responsible for s ges, write your name and cas	amended filing  12/15  In the category where you supplying correct
official Form 10 Chedule A/E each category, separately li normation. If more space is a swer every question.  The property of	6A/B B: Property st and describe items ete and accurate as preeded, attach a separatence, Building, Land,	List an asset ossible. If two ate sheet to to or Other Real	only once. If an asset fits in more than of married people are filing together, both a his form. On the top of any additional pag Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	amended filing  12/15  In the category where you supplying correct
official Form 10 Schedule A/E each category, separately li nok it fits best. Be as compl ormation. If more space is a swer every question.  art 1: Describe Each Resid Do you own or have any leg	6A/B B: Property st and describe items ete and accurate as preeded, attach a separatence, Building, Land,	List an asset possible. If two ate sheet to the or Other Real	married people are filing together, both a his form. On the top of any additional page Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	amended filing  12/15  In the category where you supplying correct
each category, separately link it fits best. Be as complormation. If more space is a swer every question.  Describe Each Residue.  Do you own or have any lead to the service of the servi	B: Property ist and describe items ete and accurate as poneeded, attach a separ	List an asset possible. If two ate sheet to the or Other Real	married people are filing together, both a his form. On the top of any additional page Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	amended filing  12/15  In the category where you supplying correct
each category, separately link it fits best. Be as complormation. If more space is a swer every question.  Describe Each Residue.  Do you own or have any lead to the service of the servi	B: Property ist and describe items ete and accurate as poneeded, attach a separ	List an asset possible. If two ate sheet to the or Other Real	married people are filing together, both a his form. On the top of any additional page Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	n the category where you supplying correct
each category, separately link it fits best. Be as complormation. If more space is a swer every question.  Describe Each Residue.  Do you own or have any lead to the service of the servi	B: Property ist and describe items ete and accurate as poneeded, attach a separ	List an asset possible. If two ate sheet to the or Other Real	married people are filing together, both a his form. On the top of any additional page Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	n the category where you supplying correct
each category, separately link it fits best. Be as complormation. If more space is swer every question.  Describe Each Residue to you own or have any let No. Go to Part 2.	st and describe items ete and accurate as poneeded, attach a separ dence, Building, Land,	List an asset possible. If two ate sheet to the or Other Real	married people are filing together, both a his form. On the top of any additional page Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	n the category where you
nk it fits best. Be as complormation. If more space is a swer every question.  The provided HTML representation of the provided HTML repre	ete and accurate as poneeded, attach a separatence, Building, Land,	ossible. If two ate sheet to the or Other Real	married people are filing together, both a his form. On the top of any additional page Estate You Own or Have an Interest In	are equally responsible for s ges, write your name and cas	supplying correct
Do you own or have any le	· · · · ·				
Do you own or have any le	· · · · ·				
□ No. Go to Part 2.	gal or equitable intere	st in any resid	ence, building, land, or similar property?		
_					
_					
	4.0				
— Tes. Where is the proper	ty?				
1		What	is the property? Check all that apply		
445 Broadway Stre	et	=	Single-family home	Do not deduct secured c	claims or exemptions. Put
Street address, if available, or	other description		Duplex or multi-unit building		ed claims on Schedule D: nims Secured by Property.
			Condominium or cooperative		
			Manufactured or mobile home	Current value of the	Current value of the
Carnegie	PA 15106-00	00 🗆	Land	Current value of the entire property?	Current value of the portion you own?
City	State ZIP Code		Investment property	\$149,999.00	\$149,999.0
			Timeshare Other		your ownership interest
		_	has an interest in the property? Check one	Proceedings and the second	nancy by the entireties, o
			Debtor 1 only	Fee Simple	
Allegheny		□	Debtor 2 only		
County			Debtor 1 and Debtor 2 only	☐ Check if this is cor	mmunity property
			At least one of the debtors and another	(see instructions)	, p
			r information you wish to add about this i erty identification number:	tem, such as local	
			ket value based on 2016 purcha	se price	
			•		
Add the deller welve -	f the mention was	um fau all af	verse autolog from Port 4 inchestions	my antrice for	
			your entries from Part 1, including a		\$149,999.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Official Form 106A/B Schedule A/B: Property page 2

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10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

	17.5.	Credit Union	American Airlines Federal Credit Union account ending in *3419	\$0.00
	17.4.		Fidelity Goverment Money Market	\$1,199.68
	17.3.	Savings	Aspiration save account ending in *2907	\$810.21
	17.2.	Other financial account	Aspiration spend account ending in *8058	\$645.19
	17.1.	Brokerage	Aspiration account ending in *9325	\$1,455.40
□ No ■ Yes			Institution name:	
institutions			s; certificates of deposit; shares in credit unions, brokerage h the same institution, list each.	houses, and other similar
16. <b>Cash</b> Examples: Money you  No  Yes	·	•	, in a safe deposit box, and on hand when you file your petit	ion
Part 4: Describe Your Finance Do you own or have any			y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
			3, including any entries for pages you have attached	\$3,240.00
<ul><li>14. Any other personal ar</li><li>■ No</li><li>□ Yes. Give specific in</li></ul>		•	already list, including any health aids you did not list	
■ No □ Yes. Describe				
13. Non-farm animals  Examples: Dogs, cats,	birds. hor	ses		
12. <b>Jewelry</b> Examples: Everyday je  No  ☐ Yes. Describe	ewelry, cos	stume jewelry, engagem	nent rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	lothes, fur	s, leather coats, designe	er wear, shoes, accessories	
■ No □ Yes. Describe				
_	s, snotgui	ns, ammunition, and rela	ated equipment	

Official Form 106A/B Schedule A/B: Property page 3

Case 19-21620-GLT Doc 15 Filed 05/20/19 Entered 05/20/19 13:46:36 Document Page 6 of 54 Case number (if known) 19-21620 Debtor 1 Andy Fang 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: Yes. ..... Comcast Corp New CI A (CMCSA) \$1,165.00 29.143 Shares 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: IRA \$142.96 Aspiration fund adviser account **PNC Incentive Savings Plan account** 401(k) \$6,038.00 Pension **PNC Pension Plan** \$758.84 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them...

#### 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

☐ Yes. Give specific information about them...

#### 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

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Debtor 1 Andy Fang	nent Page 7 of 54 Case number (if know)	n) <b>19-21620</b>
☐ Yes. Give specific information about them		
Money or property owed to you?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you		
■ No		
☐ Yes. Give specific information about them, including whether	er you already filed the returns and the tax years	
<ul> <li>29. Family support  Examples: Past due or lump sum alimony, spousal support, cl  No  ☐ Yes. Give specific information</li> </ul>	child support, maintenance, divorce settlement, prope	rty settlement
30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disa benefits; unpaid loans you made to someone else  No  ☐ Yes. Give specific information		pensation, Social Security
31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings a  □ No	account (HSA); credit, homeowner's, or renter's insur	rance
Yes. Name the insurance company of each policy and list its Company name:	s value. Beneficiary:	Surrender or refund value:
Employer provided life insu policy	urance Kevin Kennedy	\$0.0
<ul> <li>32. Any interest in property that is due you from someone when If you are the beneficiary of a living trust, expect proceeds from someone has died.</li> <li>No</li> <li>Yes. Give specific information</li> <li>33. Claims against third parties, whether or not you have filed Examples: Accidents, employment disputes, insurance claims</li> <li>No</li> <li>Yes. Describe each claim</li> </ul>	m a life insurance policy, or are currently entitled to re d a lawsuit or made a demand for payment	eceive property because
34. Other contingent and unliquidated claims of every nature,  ■ No  □ Yes. Describe each claim	, including counterclaims of the debtor and rights	to set off claims
35. Any financial assets you did not already list ■ No □ Yes. Give specific information		
36. Add the dollar value of all of your entries from Part 4, inc for Part 4. Write that number here		\$12,215.28
Part 5: Describe Any Business-Related Property You Own or Have an	n Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business	s-related property?	
<u> </u>		
No. Go to Part 6.		

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) 19-21620 Debtor 1 Andy Fang Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$149,999.00 Part 2: Total vehicles, line 5 \$10,325.00 Part 3: Total personal and household items, line 15 57. \$3,240.00 Part 4: Total financial assets, line 36 \$12,215.28 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$25,780.28 Copy personal property total \$25,780.28

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$175,779.28

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		DOWN		
Fill in this infor	mation to identify your	case:		
Debtor 1	Andy Fang			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA	
Case number	19-21620			
(if known)				

### Official Form 106C

Part 1: Identify the Property You Claim as Exempt

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own		Amo	ount of the exemption you claim	Specific laws that allow exemption			
	Copy the value from Check only one box for each exemption. Schedule A/B							
	445 Broadway Street Carnegie, PA 15106 Allegheny County	\$149,999.00		\$9,493.00	11 U.S.C. § 522(d)(1)			
	Market value based on 2016 purchase price Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	1 sofa, 9 chairs, 2 stools 1 ottoman, 1	\$2,690.00		\$2,690.00	11 U.S.C. § 522(d)(3)			
	entertainment center, 1 dining room table, 2 rugs, cleaning equipment, 1 refrigerator, 1 stove, 1 dishwasher, 1 washer, 1 dryer, 1 desk and 1 bedroom set Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	2 televisions and 2 DVD players Line from Schedule A/B: 7.1	\$550.00		\$550.00	11 U.S.C. § 522(d)(3)			
	Line Irom Scriedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	Brokerage: Aspiration account ending in *9325	\$1,455.40	-	\$1,455.40	11 U.S.C. § 522(d)(5)			

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 17.1

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Case number (if known) 19-21620

Mildy Fally			Case Humber (II known)	19-21020
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Other financial account: Aspiration spend account ending in *8058	\$645.19		\$645.19	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Savings: Aspiration save account ending in *2907	\$810.21		\$810.21	11 U.S.C. § 522(d)(5)
ine from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Fidelity Goverment Money Market	\$1,199.68		\$1,199.68	11 U.S.C. § 522(d)(5)
and noni goriedale PAD. The			100% of fair market value, up to any applicable statutory limit	
Comcast Corp New CI A (CMCSA)	\$1,165.00		\$1,165.00	11 U.S.C. § 522(d)(5)
ine from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit	
RA: Aspiration fund adviser account in from Schedule A/B: 21.1	\$142.96		\$142.96	11 U.S.C. § 522(d)(12)
			100% of fair market value, up to any applicable statutory limit	
401(k): PNC Incentive Savings Plan	\$6,038.00		\$6,038.00	11 U.S.C. § 522(d)(12)
ine from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
Pension: PNC Pension Plan	\$758.84		\$758.84	11 U.S.C. § 522(d)(10)(E)
and non governor AD. 2119			100% of fair market value, up to any applicable statutory limit	
Employer provided life insurance policy	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Kevin Kennedy Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	of )
No	o yours and man of the	11 COC	iod on or anter the date or adjustine	<i>j</i>
☐ Yes. Did you acquire the property covere ☐ No	ed by the exemption w	ithin 1	,215 days before you filed this case	?
☐ Yes				

	Case	19-21620-GL		age 11 d	red 05/20/19 of 54	13:46:36 Des	c Main
Filli	n this inforr	nation to identify yo					
Deb	tor 1	Andy Fang					
D - I-	10	First Name	Middle Name La	st Name			
Debt (Spou	tor 2 ise if, filing)	First Name	Middle Name La	st Name		-	
Unite	ed States Ba	nkruptcy Court for the	E: WESTERN DISTRICT OF PENNS	YLVANIA			
Case	e number _	19-21620					
(if kno	own)						if this is an led filing
	cial Forn		s Who Have Claims Se	cured	hy Propert	V	12/15
						<u> </u>	
s nee		e Additional Page, fill it	If two married people are filing together, bout, number the entries, and attach it to the				
1. Do	any creditors	have claims secured b	y your property?				
[	☐ No. Checl	this box and submit	this form to the court with your other sch	edules. You	have nothing else	o report on this form.	
I	Yes. Fill in	all of the information	below.				
Part	1 List A	II Secured Claims					
			more than one secured claim, list the creditor		Column A	Column B	Column C
			is a particular claim, list the other creditors in F tical order according to the creditor's name.	Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	American Union	Airlines Credit	Describe the property that secures the o	claim:	\$14,211.47	\$10,325.00	\$3,886.47
	Creditor's Nam	е	2014 Toyota Prius 65,600 miles Value based on NADA				
	-	on Carter Blvd. h, TX 76155	As of the date you file, the claim is: Checapply.  Contingent	k all that			
		, City, State & Zip Code	☐ Unliquidated				
Who	owes the de	ebt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	ebtor 1 only	3.1001. 0.10.	☐ An agreement you made (such as mort	gage or secur	ed		
_	ebtor 2 only		car loan)				
_	ebtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			

**Automobile Loan** 

3419

 $\square$  Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number

 $\hfill \square$  At least one of the debtors and another

Date debt was incurred 03/29/2018

 $\square$  Check if this claim relates to a

community debt

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Debtor 1 Andy Fang		Case number (if known)	19-21620	
First Name Middle N	ame Last Name			
2.2 Quicken Loans	Describe the property that secures the claim:	\$140,506.00	\$149,999.00	\$0.00
Creditor's Name	445 Broadway Street Carnegie, PA 15106 Allegheny County Market value based on 2016 purchase price			
1050 Woodward Avenue Detroit, MI 48226	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgag	je		
Date debt was incurred 07/28/2016	Last 4 digits of account number 580	05		
If this is the last page of your form, add	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$154,717 \$154,717		
Write that number here:		<b>4.0.</b> ,		
Part 2: List Others to Be Notified for	r a Debt That You Already Listed			
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that we to someone else, list the creditor in Part 1, ar t you listed in Part 1, list the additional creditors iis page.	nd then list the collection age	ency here. Similarly, if you h	ave more
Name, Number, Street, City, State & American Airlines Credit UP P O Box 619001	nion	which line in Part 1 did you ent	er the creditor?2.1	
Dallas, TX 75261-9001				

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		Document	Page	13 of 5	54		
Fill i	n this information to identify your case	:					
Debt	tor 1 Andy Fang						
	First Name	Middle Name	Last Nam	е			
Debt	tor 2 se if, filing) First Name	Middle Name	Last Nam	Δ			
Unite	ed States Bankruptcy Court for the: Wi	ESTERN DISTRICT OF	PENNSYLVA	NIA			
Case	e number 19-21620						
(if kno	own)						t if this is an
						amen	ded filing
Offi	cial Form 106E/F						
	nedule E/F: Creditors Who	Have Unsecure	ed Claim	s			12/15
iny ex Sched Sched eft. A name	complete and accurate as possible. Use Par xecutory contracts or unexpired leases that dule G: Executory Contracts and Unexpired I dule D: Creditors Who Have Claims Secured ttach the Continuation Page to this page. If y and case number (if known).	could result in a claim. Al Leases (Official Form 1060 by Property. If more space you have no information to	so list executo 3). Do not inclu e is needed, co	ry contracts ude any crec py the Part	s on Schedule A/B: P ditors with partially s you need, fill it out, r	roperty (Official For ecured claims that number the entries	rm 106A/B) and on are listed in in the boxes on the
Part							
_	Do any creditors have priority unsecured claid  No. Go to Part 2.	ms against you?					
	Yes.						
jo P F	List all of your priority unsecured claims. If a dentify what type of claim it is. If a claim has bot oossible, list the claims in alphabetical order account 1. If more than one creditor holds a particular for an explanation of each type of claim, see the	h priority and nonpriority am ording to the creditor's nam ar claim, list the other credito	nounts, list that one. If you have noors in Part 3.	claim here ar nore than two	nd show both priority a	nd nonpriority amour	nts. As much as
2.1	Internal Revenue Service	Last 4 digits of ac	count number	9304	\$7,373.63	\$7,373.63	_
	Priority Creditor's Name						
	1000 Liberty Avenue Pittsburgh, PA 15222	When was the dek	ot incurred?	2016			
	Number Street City State Zip Code	As of the date you	ı file, the claim	is: Check al	II that apply		
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY	unsecured cla	aim:			
	☐ At least one of the debtors and another	☐ Domestic suppo	ort obligations				
	☐ Check if this claim is for a community d	ebt Taxes and certa	ain other debts	ou owe the	government		
	Is the claim subject to offset?	☐ Claims for death	h or personal in	ury while you	u were intoxicated		
	■ No	Other. Specify					
	Yes		1040 taxes	}			
Part	2: List All of Your NONPRIORITY Ur	secured Claims					
	Oo any creditors have nonpriority unsecured						
_	$\square$ No. You have nothing to report in this part. S		with your other	schedules.			
ı	Yes.						
U	List all of your nonpriority unsecured claims unsecured claim, list the creditor separately for e han one creditor holds a particular claim, list the	each claim. For each claim li	isted, identify w	nat type of cl	laim it is. Do not list cla	ims already included	I in Part 1. If more

Total claim

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Document Page 14 of 54 Debtor 1 Andy Fang Case number (if known) 19-21620 4.1 American Airlines Credit Union Last 4 digits of account number 2015 \$1,512.44 Nonpriority Creditor's Name 4151 Amon Carter Blvd. When was the debt incurred? 08/23/2016 Fort Worth, TX 76155 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Necessary expenses Other. Specify 4.2 **American Express** \$1,256.00 Last 4 digits of account number 5182 Nonpriority Creditor's Name PO Box 981537 When was the debt incurred? 3/08/2017 El Paso, TX 79998-1537 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No  $\Pi$  Yes **Necessary expenses** Other. Specify 4.3 **Best Buy/CBNA** Last 4 digits of account number \$1,706.00 0624 Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? 8/02/2016 Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

■ No

☐ Yes

☐ Student loans

report as priority claims

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Consumer purchases

☐ Check if this claim is for a community

Is the claim subject to offset?

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Document Page 15 of 54 Debtor 1 Andy Fang ase number (if known) 19-21620 \$380.00 4.4 Capital One Bank USA NA Last 4 digits of account number 6054 Nonpriority Creditor's Name POB 30281 When was the debt incurred? 9/23/2018 Salt Lake City, UT 84130-0281 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Necessary expenses Other. Specify 4.5 **Chase Card** Last 4 digits of account number 6586 \$2,720.00 Nonpriority Creditor's Name P.O. Box 15369 When was the debt incurred? 8/02/2016 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No  $\Pi$  Yes **Necessary expenses** Other. Specify 4.6 Citicards CBNA Last 4 digits of account number \$2,100.00 3133 Nonpriority Creditor's Name PO Box 6190 When was the debt incurred? 07/29/2016 Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Necessary expenses** Other. Specify

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Debt	Andy Fang		Case number (if known) 19-21620	
4.7	Citicards/Citibank	Last 4 digits of account number	3740	\$3,247.00
	Nonpriority Creditor's Name PO Box 6241	When was the debt incurred?	8/03/2016	
	Sioux Falls, SD 57117  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	_	Student loans	d Gain.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	og plans, and other similar debts	
		· ·		
	Yes	Other. Specify Necessary	expenses	
4.8	Internal Revenue Service Nonpriority Creditor's Name	Last 4 digits of account number	9304	\$13,414.44
	1000 Liberty Avenue Pittsburgh, PA 15222	When was the debt incurred?	2009 & 2013	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify 1040 taxes		
4.9	National Tire & BT/CBNA	Last 4 digits of account number	1411	\$973.00
	Nonpriority Creditor's Name PO Box 6497 Signary Falls, SD 57117, 6407	When was the debt incurred?	12/08/2016	
	Sioux Falls, SD 57117-6497  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
		-		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u ciaiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	■ No	Other. Specify Consumer		
	■ res	Other. Specify Consumer	purchases	

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1 Andy Fang 19-21620

No. 144 - ATD Doc 1 1104	2224		<b>*** *** *** ***</b>
Nordstrom/TD Bank USA  Nonpriority Creditor's Name	Last 4 digits of account number 3324		\$2,324.00
13531 E Caley Ave.	When was the debt incurred? 01/02/20	)18	
Englewood, CO 80111  Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply	
Who incurred the debt? Check one.		,	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
$\square$ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreel report as priority claims	ment or divorce that you did not	
No	Debts to pension or profit-sharing plans, and	other similar debts	
Yes	■ Other. Specify Clothing and housel		
PNC Bank	0204		¢c00.00
Nonpriority Creditor's Name	Last 4 digits of account number0201		\$600.00
PO Box 3180	When was the debt incurred? 05/25/20	)18	
Pittsburgh, PA 15230	As of the data was file the plains in Obsal all	that and h	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all	tnat apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a separation agree	ment or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and		
Yes	Other. Specify Necessary expenses	<u>;                                    </u>	
PNC Bank	Last 4 digits of account number 1326		\$492.00
Nonpriority Creditor's Name			
PO Box 3180 Pittsburgh, PA 15230	When was the debt incurred? 07/10/20	)18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agree report as priority claims	ment or divorce that you did not	
No	Debts to pension or profit-sharing plans, and	other similar debts	
Yes			
<b>□</b> 168	■ Other. Specify Necessary expenses	<u>,                                      </u>	

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Debtor 1 Andy Fang ase number (if known) 19-21620 4.1 **PNC Bank** 1256 \$1,591.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 3180 When was the debt incurred? 03/17/2017 Pittsburgh, PA 15230 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Necessary expenses ☐ Yes 4.1 **Rocket Loans** 1890 \$6,933.00 Last 4 digits of account number Nonpriority Creditor's Name 1001 Woodward When was the debt incurred? 90/19/2018 **Suite 1750** Detroit. MI 48228 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Installment loan ☐ Yes 4.1 SYNCB/Amazon PLCC 0255 \$812.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 965015 When was the debt incurred? 03/15/2017 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer purchases ☐ Yes

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Debtor	1 Andy Fang	Case number (if known) 19-21620	)
4.1	SYNCB/BP	Last 4 digits of account number 0067	\$153.00
	Nonpriority Creditor's Name PO Box 965024	When was the debt incurred? 04/03/2017	
	Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Necessary expenses	_
4.1	SYNCB/Care Credit	Last 4 digits of account number 4793	\$409.00
	Nonpriority Creditor's Name C/O PO Box 965036 Orlando, FL 32896	When was the debt incurred? 03/05/2017	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Necessary expenses	
4.1	SYNCB/Google	Last 4 digits of account number 0058	\$902.00
<u> </u>	Nonpriority Creditor's Name PO Box 965022	When was the debt incurred? 10/15/2017	
	Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no	ot
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify Necessary expenses	

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	Alluy Fally		Case Humber (II known)	
4.1 9	SYNCB/Pay Pal	Last 4 digits of account number	0220	\$807.00
	Nonpriority Creditor's Name P.O. Box 965005	When was the debt incurred?	11/05/2017	
	Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	or choose an anat apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	purchases	
4.2	Syncb/Walmart DC	Last 4 digits of account number	8347	\$56.00
	Nonpriority Creditor's Name	_	40/47/047	
	PO Box 965024 Orlando, FL 32896	When was the debt incurred?	12/17/2017	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	purchases	
4.2	TD Bank USA/Target Credit	Last 4 digits of account number	0930	\$220.00
	Nonpriority Creditor's Name			
	PO Box 1470	When was the debt incurred?	03/30/2017	
	Minneapolis, MN 55440  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	to of the date yearing, the claim	o. Onook all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing	• •	
	☐ Yes	Other. Specify Clothing ar	nd household goods	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Andy Fang 19-21620

CBE Group, Inc. P.O. Box 2217 Waterloo, IA 50704 Line 4.8 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

5747

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	7,373.63
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	7,373.63
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	42,607.88
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	42,607.88

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Andy Fang			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA	
Case number	19-21620			
(if known)				☐ Check if this is an amended filing

#### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u></u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.3	Oity		Olate	Zii Oddc	
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		State	211 0000	
-	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 23 d	of 54	
Fill in this	information to identify your	case:			
Debtor 1	Andy Fang				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case num	ber 19-21620			☐ Check if this is an amended filing	
Schec Codebtors		re also liable for any deb		12/15 as complete and accurate as possible. If two married	
fill it out, a your name	and number the entries in the e and case number (if known	boxes on the left. Attach . Answer every question	the Additional Page t	tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write	,
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No □ Yes	S				
	hin the last 8 years, have you na, California, Idaho, Louisiana			ry? (Community property states and territories include ington, and Wisconsin.)	
`	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to f	al
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	_
	Name			☐ Schedule E/F, line	
-	Number Street	Stato	ZID Codo	_	
	City	State	ZIP Code		

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Filli	n this informat	ion to identify your ca	ase.							
Deb		Andy Fang								
	tor 2 ise, if filing)					_				
Unite	ed States Ban	kruptcy Court for the	: WESTERN DISTRICT	OF PENNSYLVANIA		_				
Case (If kno	e number	19-21620					Check if this is  An amende  A supplement	ed filing		
Of	ficial Fo	rm 106l					MM / DD/ \		ziii.ig dato.	
Sc	hedule	I: Your Inc	ome				1011017 227			12/15
supp spou	lying correct ise. If you are h a separate	information. If you separated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your spo th you, do not include	use i inforr	s living v	with you, incl	ude informa ouse. If more	ition about e space is	your needed,
1.	Fill in your e			Debtor 1			Dobtor (	or non filin	a chauca	
	information.			_			□ Empl	or non-filin	ig spouse	
	attach a sepa	ore than one job, trate page with bout additional	Employment status*	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				mployed		
	employers.		Occupation	Administrative Tie	r					
	Include part-t self-employed	ime, seasonal, or d work.	Employer's name	Numo, LLC (PNC)			_			
		nay include student er, if it applies.	Employer's address	6425 Living Place Suite 150 Pittsburgh, PA 152	206					
Part	2. Give	e Details About Mor	How long employed th		nment	for Add	itional Emplo	yment Infor	mation	
Estin	nate monthly		ate you file this form. If y	ou have nothing to repo	ort for	any line,	write \$0 in the	space. Inclu	de your no	n-filing
		iling spouse have mo a separate sheet to	ore than one employer, co this form.	mbine the information fo	r all e	employers	for that perso	on on the line	s below. If	you need
						For	Debtor 1	For Debto		
2.			ry, and commissions (be calculate what the monthly		2.	\$	5,416.67	\$	N/A	
3.	Estimate and	d list monthly overti	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gro	oss Income. Add lir	ne 2 + line 3.		4.	\$	5,416.67	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Deb	tor 1	Andy Fang		_		Case	e number (if k	(nown)	19-	21620		
	<b>C</b>	ur line 4 have		4			r Debtor 1	0.07		or Debtor on-filing s	spouse	
	Cop	by line 4 here		4.		\$_	5,41	6.67	\$_		N/A	_
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Secur	•	5		\$_		5.65	\$		N/A	_
	5b.	Mandatory contributions for reti	•	51		\$_		2.50	\$		N/A	_
	5c. 5d.	Voluntary contributions for retire Required repayments of retirements		5	c. d.	\$_ \$		1.67 0.00	\$ \$		N/A N/A	_
	5e.	Insurance	ent runa loans		и. Э.	\$ -		4.70	φ \$		N/A	_
	5f.	Domestic support obligations		51		\$-		0.00	\$		N/A	_
	5g.	Union dues		5	g.	\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:		51	h.+	\$_		0.00	+ \$		N/A	-
6.	Add	I the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,11	4.52	\$		N/A	_
7.	Cal	culate total monthly take-home pay	. Subtract line 6 from line 4.	7.		\$_	3,30	2.15	\$		N/A	_
8.	List 8a.	all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, rty and business showing gross									
		monthly net income.		8		\$_		0.00	\$		N/A	_
	8b. 8c.	Interest and dividends	ou, a non-filing spouse, or a dependent	81	о.	\$_		0.00	\$_		N/A	_
	8d. 8e. 8f.	regularly receive Include alimony, spousal support, settlement, and property settlement Unemployment compensation Social Security Other government assistance th Include cash assistance and the value that you receive, such as food star Nutrition Assistance Program) or h	child support, maintenance, divorce nt.  at you regularly receive alue (if known) of any non-cash assistance nps (benefits under the Supplemental	80 80 80	d. e.	\$_ \$_ \$_		0.00 0.00 0.00	\$ 5		N/A N/A N/A	-
	8g.	Specify: Pension or retirement income		_ 81 _ 89		\$_ \$		0.00	\$ \$		N/A N/A	_
	8h.	Other monthly income. Specify:	Second job net monthly income - Fitness International		y. h.+	· –		7.94	٠.		N/A	-
9.	Add	l all other income. Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	. [	\$_	27	7.94	\$_		N/A	A
10	Cal	culate monthly income. Add line 7	+ line 9	10.	\$		3,580.09	+ \$		N/A	= \$	3,580.09
10.		the entries in line 10 for Debtor 1 and		10.	ΙΨ.		3,300.03	┤' ゙		IVA		3,300.03
11.	State Included Other	te all other regular contributions to ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedule partner, members of your household, your uded in lines 2-10 or amounts that are not	dep						Schedul	e J. +\$	0.00
12.		e that amount on the Summary of Sc	line 10 to the amount in line 11. The resthedules and Statistical Summary of Certain								\$	3,580.09
13.	Do :	•	e within the year after you file this form	?							Combin	ned y income
		No. Yes. Explain:										

Official Form 106l Schedule I: Your Income page 2

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Debtor 1	Andy Fang	Case number (if known)	19-21620

### Official Form B 6I Attachment for Additional Employment Information

Debtor	
Occupation	Yoga Teacher
Name of Employer	Fitness International LLC
How long employed	3 years
Address of Employer	3161 Michelson Drive
	Suite 600
	Irvine, CA 92612

Official Form 106l Schedule I: Your Income page 3

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Fill	in this information to identify yo	our case:					
	Andy Fang					k if this is: An amended filing	ving postpetition chapter
	ouse, if filing)				_	A supplement snow 13 expenses as of t	01 1
Unit	ed States Bankruptcy Court for the	WESTER	RN DISTRICT OF PENNS	YLVANIA	-	MM / DD / YYYY	
	e number 19-21620 nown)						
	fficial Form 106J	 Expens	ses				12/15
info	as complete and accurate as ormation. If more space is ne nber (if known). Answer ever	eded, attac	h another sheet to this f				
Par		hold					
1.	Is this a joint case?  ■ No. Go to line 2.  □ Yes. Does Debtor 2 live □ No □ Yes. Debtor 2 must	·	te household?	for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.	<b>—</b> 103.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state the dependents names.						□ No □ Yes
3.	Do your expenses include expenses of people other t yourself and your depende		•				Li Tes
exp	Estimate Your Ongoi imate your expenses as of your expenses as of a date after the lolicable date.	our bankruj	ptcy filing date unless ye				
the	lude expenses paid for with a value of such assistance an ficial Form 106I.)					Your expe	enses
4.	The rental or home owners payments and any rent for th			oclude first mortgage	e 4. \$		0.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	<ul><li>4b. Property, homeowner's</li><li>4c. Home maintenance, re</li></ul>				4b. \$ 4c. \$		0.00 131.95
	4d. Homeowner's associate				4d. \$		0.00
5.	Additional mortgage payme	ents for you	<b>ır residence</b> , such as hor	ne equity loans	5. \$		0.00

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Debtor 1 Andy Fang	<u>g</u>	Case num	ber (if known)	19-21620
6. Utilities:				
	eat, natural gas	6a.	\$	326.81
6b. Water, sewe	er, garbage collection	6b.	\$	124.01
6c. Telephone,	cell phone, Internet, satellite, and cable services	6c.	\$	154.00
6d. Other. Spec	ify:	6d.	\$	0.00
. Food and housek			\$	400.00
	ildren's education costs	8.	\$	0.00
Clothing, laundry	, and dry cleaning	9.	\$	180.00
0. Personal care pro	-	10.	\$	165.00
Medical and dent		11.	\$	30.00
	nclude gas, maintenance, bus or train fare.		· —	
Do not include car		12.	\$	386.00
3. Entertainment, cl	ubs, recreation, newspapers, magazines, and books	13.	\$	210.00
4. Charitable contril	butions and religious donations	14.	\$	0.00
5. Insurance.				
	urance deducted from your pay or included in lines 4 or 20.			
15a. Life insuran		15a.	•	0.00
15b. Health insur		15b.	·	0.00
15c. Vehicle insu	ırance	15c.	\$	134.45
15d. Other insura		15d.	\$	0.00
	ude taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
7. Installment or lea				
17a. Car paymen		17a.	·	0.00
17b. Car paymen		17b.	\$	0.00
17c. Other. Spec	ify:	17c.	\$	0.00
17d. Other. Spec	ify:	17d.	\$	0.00
	f alimony, maintenance, and support that you did not report			0.00
	our pay on line 5, Schedule I, Your Income (Official Form 106	<b>I).</b> 18.	·	0.00
	you make to support others who do not live with you.		\$	0.00
Specify:		19.	_	
	ty expenses not included in lines 4 or 5 of this form or on So			0.00
20a. Mortgages o		20a.	· -	0.00
20b. Real estate		20b.	·	0.00
	meowner's, or renter's insurance	20c.	·	0.00
	e, repair, and upkeep expenses	20d.	·	0.00
20e. Homeowner	's association or condominium dues	20e.	\$	0.00
1. Other: Specify:	Anticipated Rent Payment	21.	+\$	1,000.00
2. Calculate your m	onthly expenses	<u>-</u>		
22a. Add lines 4 th			\$	3,242.22
	(monthly expenses for Debtor 2), if any, from Official Form 106J-:	2	\$	J,242.22
		<u>_</u>		0.010.00
22c. Add line 22a	and 22b. The result is your monthly expenses.		\$	3,242.22
3. Calculate your m	onthly net income.			
	2 (your combined monthly income) from Schedule I.	23a.	\$	3,580.09
	nonthly expenses from line 22c above.	23b.	•	3,242.22
	, , ,		·	
23c. Subtract vou	ur monthly expenses from your monthly income.			
	s your monthly net income.	23c.	\$	337.87
For example, do you	increase or decrease in your expenses within the year after expect to finish paying for your car loan within the year or do you expect y			ease or decrease because of a
_	rms of your mortgage?			
No.				
☐ Yes. [	Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Andy Fang				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	19-21620				
(if known)					☐ Check if this is an amended filing
obtaining mone years, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1	n connection with a ban		s. Making a false statemen in fines up to \$250,000, or	t, concealing property, or imprisonment for up to 20
Si	gn Below				
Did you p	ay or agree to pay some	eone who is NOT an attor	rney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ry Petition Preparer's Notice, Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	d
X /s/ An	ndy Fang		x		
	Fang cure of Debtor 1		Signature of	f Debtor 2	
Date	May 20, 2019		Date		

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Fill i	n this inform	ation to identify you	r case:			
Debt		Andy Fang				
		First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
		kruptcy Court for the:	WESTERN DISTRICT O	E DENNSVI VANIA		
Office	eu States Dan	ikiupicy Court for the.	WESTERN DISTRICT O	FEININGTEVAINIA		
Case (if know		9-21620			_	Check if this is an mended filing
Sta Be as inforr	complete a	of Financial and accurate as possione space is needed,	ble. If two married people attach a separate sheet to		ankruptcy equally responsible for sup y additional pages, write you	
numb	<u> </u>	). Answer every que:	stion. arital Status and Where You	Llived Refore		
		current marital statu		a Lived Belole		
[	☐ Married ■ Not marr					
2. [	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
! [	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	<i>I</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
					ity property state or territory	
] ]	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explair	n the Sources of You	r Income			
F	Fill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including part re together, list it only once ur		ndar years?
[	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$22,203.32	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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		Ducument Page 31 01 34	
Debtor 1	Andy Fang	Case number (if known)	19-21620

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross in (before exclusion	deductions and	Sources of inco		Gross income (before deductions and exclusions)
For (Ja	last calend nuary 1 to	dar year: December	31, 2018 )	■ Wages, commissions, bonuses, tips		\$66,011.00	☐ Wages, components bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a b	ousiness	
	the calend nuary 1 to			■ Wages, commissions, bonuses, tips		\$58,870.00	☐ Wages, comi bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a b	ousiness	
	Include includ	come regard oublic bene f you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Ex pensions; rental income; inte se and you have income that ome from each source separa	kamples of o erest; divider you receive	ther income are a nds; money collect d together, list it o	alimony; child suppo eted from lawsuits; r only once under De	royalties; an btor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each so	deductions and	Sources of inco		Gross income (before deductions and exclusions)
	last calenguery 1 to		31, 2018 )	Unemployment		\$600.00			
				IRA Distributions		\$1,451.00			
				Interest / Dividends		\$400.00			
Par 6.		Debtor 1's	or Debtor 2	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily cons	er debts?		s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
				personal, family, or househo					(1, 11
		0	,	ore you filed for bankruptcy, d	did you pay a	any creditor a tota	l of \$6,825* or mor	e?	
		□ <sub>No.</sub> □ <sub>Yes</sub>	Go to line 7		-1-1	<b>\$0.005</b>			h - t-t-l t
			paid that cr not include	each creditor to whom you pa editor. Do not include payme payments to an attorney for t t on 4/01/22 and every 3 year	ents for dome this bankrup	estic support oblig tcy case.	gations, such as chi	ild support a	and alimony. Also, do
	■ Yes.			or both have primarily construction or you filed for bankruptcy, d			l of \$600 or more?		
		No.	Go to line 7	· .					
		□ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.					
	Creditor's	s Name and	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

Case 19-21620-GLT Doc 15 Filed 05/20/19 Entered 05/20/19 13:46:36 Document Page 32 of 54 Case number (if known) 19-21620 Debtor 1 Andy Fang Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Dates you gave Value Describe the gifts per person the gifts

Address:

Person to Whom You Gave the Gift and

Case 19-21620-GLT Doc 15 Filed 05/20/19 Entered 05/20/19 13:46:36 Desc Main Page 33 of 54 Document Case number (if known) 19-21620 Debtor 1 Andy Fang 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No П Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 2/21/2019, The Debt Doctors, LLC **Attorney Fees** \$2,000.00 607 College Street, Suite 101 3/1/2019 Pittsburgh, PA 15232 mmh@thedebtdoctors.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο П Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred payment Address or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details.

Address

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

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Case number (if known) 19-21620 Document

Within 10 years before you filed for bankruptey, did you transfer any property to a solf-cettled trust or similar device of which you are a

Debtor 1 Andy Fang

10.	beneficiary? (These are often called asset-protection No		y property to a	sen-seme	u trust of similar device	or writerry you are a
	☐ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and St	torage Unit	es	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or compared to the compar	-				
	houses, pension funds, cooperatives, associated No	tions, and other finan	icial institution	ıs.		
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de <sub>l</sub>	posit box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1	year before	re you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	•				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any proper	ty you bor	rowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inforn	nation				
For t	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	s defined under any e		law, wheth	er you now own, operate	e, or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines a	as a hazardous	s waste, ha	zardous substance, toxi	c substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Case number (if known) 19-21620

Debtor 1 Andy Fang

Date of notice
Date of notice
Date of notice
nd orders.
Status of the case
business?
umber er ITIN
umber or ITIN.
number or ITIN. de all financial

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Case number (if known) 19-21620 Debtor 1 Andy Fang Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Andy Fang Signature of Debtor 2 **Andy Fang** Signature of Debtor 1 Date May 20, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Fill in this information to identify your case:						
Debtor 1	Andy Fang					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the:		Western District of Pennsylvania				
Case number (if known)	19-21620					

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					
	☐ Check if this is an amended filing					

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		•					
Par	11: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one of	nly.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married. Fill out both Columns A and B, lines 2-11.						
1 th	ill in the average monthly income that you received from al D1(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tota couses own the same rental property, put the income from that	month peri	od would in the re	be March 1 throusult. Do not include	igh August 31. If the amo le any income amount m	ount of your monthly incom- ore than once. For exampl	e varied during e, if both
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and cor	nmissio	ons (before all	\$ 5,654.63	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e paymer	its from	a spouse if	\$	\$	
4.	All amounts from any source which are regularly por you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3.	<b>t.</b> Include ld, your d	regulai epende	r contributions nts, parents,	\$0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor '	1				
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00				
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	\$	
6.	Net income from rental and other real property	Debtor '					
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00			_	
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1	Andy Fang		Case number	(if known)	19-21620	)	
			Column A Debtor 1		Column B Debtor 2 o	or	
7. <b>In</b> t	terest, dividends, and royalties		\$	0.00	\$		
8. <b>U</b> r	nemployment compensation		\$	0.00	\$		
	o not enter the amount if you contend that the amount received was a ben e Social Security Act. Instead, list it here:	efit unde	r				
		0.00					
	For your spouse\$						
	ension or retirement income. Do not include any amount received that we nefit under the Social Security Act.	as a	\$	0.00	\$		
Do red do	come from all other sources not listed above. Specify the source and a not include any benefits received under the Social Security Act or payme ceived as a victim of a war crime, a crime against humanity, or internation mestic terrorism. If necessary, list other sources on a separate page and all below.	ents al or	\$	0.00	\$		
			\$	0.00	\$		
	Total amounts from separate pages, if any.		. \$	0.00	\$		
	alculate your total average monthly income. Add lines 2 through 10 for ich column. Then add the total for Column A to the total for Column B.	\$	5,654.63	+ \$ _		= \$_	5,654.63
12. <b>C</b> c	opy your total average monthly income from line 11.					\$	5,654.63
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	3 , ,						
	Fill in the amount of the income listed in line 11, Column B, that was No dependents, such as payment of the spouse's tax liability or the spouse	e's suppo	ort of someone	e other tha	an you or you	ır depend	ents.
	Below, specify the basis for excluding this income and the amount of ir adjustments on a separate page.	ncome de	evoted to each	purpose.	If necessary	/, list addi	tional
	If this adjustment does not apply, enter 0 below.	\$					
		_					
		+\$		_			
	Total	\$_	0.0	O Col	oy here=>		0.00
14. <b>Y</b>	our current monthly income. Subtract line 13 from line 12.					\$	5,654.63
15. <b>C</b>	Calculate your current monthly income for the year. Follow these step	s:					
1	5a. Copy line 14 here=>					\$	5,654.63
	Multiply line 15a by 12 (the number of months in a year).					X	12
1	5b. The result is your current monthly income for the year for this part of	the form	1			\$	67,855.56

Debtor 1

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Debt	or 1	Andy Fang		Case number (if known)	19-21620	
16	6. Calo	culate the median family income that applies to y	ou. Follow these steps:			
	16a	Fill in the state in which you live.	PA			
	16h	Fill in the number of people in your household.	1			
		Fill in the median family income for your state and				55,117.00
	100.	To find a list of applicable median income amounts	, go online using the lin			
47	. Uav	instructions for this form. This list may also be avai	lable at the bankruptcy	clerk's office.		
17		do the lines compare?		is famos abaal, bass 4. Dianas		
	17a	Line 15b is less than or equal to line 16c. C  11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				arminea unaer
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your Disposa			
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Cop	y your total average monthly income from line 1	1			5,654.63
19.	cont	uct the marital adjustment if it applies. If you are end that calculating the commitment period under 1 use's income, copy the amount from line 13.	married, your spouse is 1 U.S.C. § 1325(b)(4) al	not filing with you, and you lows you to deduct part of yo	our	
	19a	. If the marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$	0.00
	19b	Subtract line 19a from line 18.			\$	5,654.63
20.	Cal	culate your current monthly income for the year.	Follow these steps:			E 054 00
	20a	Copy line 19b			\$	5,654.63
		Multiply by 12 (the number of months in a year).			x 1	2
	20b	. The result is your current monthly income for the y	ear for this part of the fo	rm	\$6	57,855.56
	20c.	Copy the median family income for your state and	size of household from I	ine 16c		55,117.00
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by the court,	on the top of page 1 of this f	form, check box 3, The	commitment
		Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise ordered	by the court, on the top of pa	age 1 of this form, checl	cbox 4, The
Par	t 4:	Sign Below				
	By s	igning here, under penalty of perjury I declare that t	he information on this st	atement and in any attachme	ents is true and correct	
,	x /s/	Andy Fang				
•	Ar	ndy Fang				
	•	gnature of Debtor 1 • May 20, 2019				
		MM / DD / YYYY				
	If yo	u checked 17a, do NOT fill out or file Form 122C-2.				
	If yo	u checked 17b, fill out Form 122C-2 and file it with t	his form. On line 39 of the	nat form, copy your current n	nonthly income from lin	e 14 above.

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Fill in	this information to identi	fy your case:					
Debto	r 1 Andy Fang						
Debto (Spou	r 2 se, if filing)						
United	States Bankruptcy Court fo	or the: Western District of Penn	nsylvania				
Case (if kno	number <u>19-21620</u> wn)			□ CI	neck if this i	s an amendec	I filing
	ı Form 122C-2 ıpter 13 Calcula	ation of Your Disp	osable lı	ncome			04/19
Comm	itment Period (Official Fo	·			•		
space	is needed, attach a separa	possible. If two married people ate sheet to this form, Include t ne and case number (if known).	the line number				
Part 1	: Calculate Your Dedu	uctions from Your Income					
the	questions in lines 6-15. T	e (IRS) issues National and Loc o find the IRS standards, go on lable at the bankruptcy clerk's	nline using the l				
exp	enses if they are higher tha	eet out in lines 6-15 regardless of n the standards. Do not include a y amounts that you subtracted fro	any operating exp	penses that you subtracte	ed from incor		
If yo	our expenses differ from mo	onth to month, enter the average of	expense.				
Not	e: Line numbers 1-4 are no	t used in this form. These number	ers apply to inform	nation required by a simil	ar form used	in chapter 7 cas	ses.
5.	The number of people u	sed in determining your deduc	tions from inco	me			
		le who could be claimed as exem Iditional dependents whom you so our household.			n	1	
Nat	ional Standards	You must use the IRS National St	Standards to answ	ver the questions in lines	6-7.		
6.		er items: Using the number of per amount for food, clothing, and of		d in line 5 and the IRS Na	tional	\$	647.00
7.	the dollar amount for out-opeople who are 65 or olde	re allowance: Using the number of-pocket health care. The number of-pocket health care the number ar-because older people have a hint, you may deduct the additiona	er of people is sp higher IRS allow	lit into two categoriespe ance for health car costs.	ople who are	under 65 and	

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Andy Fang Debtor 1 Case number (if known) 19-21620 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 52.00 Copy here=> 52.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 52.00 Copy total here= 52.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 502.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 843.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Quicken Loans** 1,263.00 Сору Repeat this amount 1,263.00 1,263.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Debtor 1 Andy Fang Case number (if known) 19-21620 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 230.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 2014 Toyota Prius 65,600 miles Value based on NADA 13a. Ownership or leasing costs using IRS Local Standard..... 497.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **American Airlines Credit Union** 268.19 Repeat this Copy amount on **Total Average Monthly Payment** 268.19 268.19 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 228.81 228.81 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment \$ Сору Repeat this here amount on line Total average monthly payment 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Andy Fang Case number (if known) 19-21620

		In addition to the expense of the following IRS categories		sted above,	you are allowed your monthly expenses	for	
16.	. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.Do not include real estate, sales, or use taxes.						1,164.42
17.	Involuntary deductions: The contributions, union dues, are	, , ,	uctions that	your job red	quires, such as retirement		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.				\$	85.96	
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					\$	0.00
19.	Court-ordered payments: administrative agency, such	as spousal or child support	payments.	·	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	· ·				· —	
	as a condition for your job				•		
	for your physically or mer	ntally challenged dependen	t child if no p	oublic educa	ation is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total monthly Do not include payments for			-	itting, daycare, nursery, and preschool.	\$	0.00
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.						0.00
	Payments for health insuran	· ·		•		\$	0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						0.00
	24. Add all of the expenses allowed under the IRS expense allowances.						
24.	Add lines 6 through 23.	owed under the into expe	nse allowar	nces.		\$	2,910.19
		·	leductions al	lowed by th		\$	2,910.19
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disabilit	These are additional d Note: Do not include a	leductions al iny expense avings acco	lowed by th allowances			2,910.19
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance, disability insurance.	These are additional d Note: Do not include a	leductions al any expense avings acco	lowed by th allowances	s listed in lines 6-24.  ses. The monthly expenses for health		2,910.19
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance, your dependents.	These are additional d Note: Do not include a	leductions al any expense avings acco	lowed by the allowances bunt expense reasonable	s listed in lines 6-24.  ses. The monthly expenses for health		2,910.19
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance, your dependents.  Health insurance	These are additional d Note: Do not include a  y insurance, and health see, and health savings acco	leductions all iny expense avings accounts that are	lowed by the allowances ount expense reasonable 100.13	s listed in lines 6-24.  ses. The monthly expenses for health		2,910.19
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance	These are additional d Note: Do not include a  y insurance, and health see, and health savings acco	leductions all any expense avings accounts that are	lowed by the allowances ount expense reasonable 100.13	s listed in lines 6-24.  ses. The monthly expenses for health		2,910.19
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account	These are additional di Note: Do not include a y insurance, and health si ce, and health savings acco	leductions all any expense avings accounts that are	lowed by the allowances ount expense reasonable 100.13 0.00 175.58	s listed in lines 6-24.  ses. The monthly expenses for health ly necessary for yourself, your spouse, o		
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to	These are additional di Note: Do not include a y insurance, and health si ce, and health savings acco	leductions all any expense avings accounts that are	lowed by the allowances ount expense reasonable 100.13 0.00 175.58	s listed in lines 6-24.  ses. The monthly expenses for health ly necessary for yourself, your spouse, o		
Add	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reason	These are additional of Note: Do not include a y insurance, and health size, and health savings according to the care of household of the care of household of the care of your immediate family who was a contract of your immediate family who your immediate family who was a contract of your immediate family who was a contract of y	leductions all any expense avings accounts that are \$	lowed by the allowances ount expense reasonable 100.13 0.00 175.58 275.71	ses. The monthly expenses for health ly necessary for yourself, your spouse, o  Copy total here=>  actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may		
25. 26.	Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reason your household or member of include contributions to an ail.	These are additional of Note: Do not include a y insurance, and health size, and health savings according to the care of household of the care of household of the care of your immediate family who count of a qualified ABLE violence. The reasonably not included in the care of your immediate family who count of a qualified ABLE violence. The reasonably not included in the care of your immediate family who count of a qualified ABLE violence.	leductions all iny expense avings accounts that are supported by the support and support to is unable to program. 26 ecessary moderns and supported by the support and support to is unable to program. 26 ecessary moderns are supported by the support and support to is unable to program. 26 ecessary moderns are supported by the support and sup	lowed by the allowances ount expense reasonable 100.13	ses. The monthly expenses for health ly necessary for yourself, your spouse, o  Copy total here=>  actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	r \$	275.71

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Debtor 1	Andy Fang	Case	number (if known)	19-216	620		
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance a	and operating	expenses	on		
	If you believe that you have home energy c 8, then fill in the excess amount of home en	osts that are more than the home energy costs ergy costs	included in ex	xpenses or	n line		
	You must give your case trustee documents amount claimed is reasonable and necessa	ation of your actual expenses, and you must sh	now that the ac	dditional		\$	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your de public elementary or secondary school.	ren who are younger than 18. The monthly e pendent children who are younger than 18 yea	expenses (not ars old to atten	more than d a private	or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must ex ot already accounted for in lines 6-23.	plain why the	amount			
	* Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment.						0.00
	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
		ional allowance, go online using the link specifico be available at the bankruptcy clerk's office.	ed in the sepa	arate			
	You must show that the additional amount of	claimed is reasonable and necessary.				\$	21.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in t nization. 11 U.S.C. § 548(d)(3) and (4).	the form of cas	sh or finan	cial		
	Do not include any amount more than 15% of your gross monthly income.					\$	0.00
	32. Add all of the additional expense deductions. Add lines 25 through 31.						296.71
Dedu	uctions for Debt Payment						
lo	pans, and other secured debt, fill in lines	in property that you own, including home m 33a through 33e. ent, add all amounts that are contractually due					
	reditor in the 60 months after you file for bar		to cach seedi	ou	Δ.	vorogo	monthly
	Mortgages on your home					aymen	•
33a.	Copy line 9b here			=	=> \$		1,263.00
	Loans on your first two vehicles						
33b.	Copy line 13b here			=	=> \$		268.19
33c.					=> \$		0.00
33d.	List other secured debts:						
	e of each creditor for other secured debt	Identify property that secures the debt	inc	es paymer lude taxes insurance?			
				No			
	-NONE-			Yes	\$		
				No			
				Yes	\$		
				No			
				Yes -	<b>-</b> \$		
					*		
33e	Total average monthly payment. Add lines	33a through 33d \$	1,53	110 t	Copy otal nere=>	\$	1,531.19

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Andy Fang 19-21620 Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount  $\div 60 = \$$ \$ -NONE-Copy total 0.00 0.00 Total \$ here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. □ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 7,373.63 ÷60 \$ 122.89 36. Projected monthly Chapter 13 plan payment 607.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 4.80 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 29.14 29.14 here=> Average monthly administrative expense 1,683.22 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 2,910.19 \$ expense allowances Copy line 32, All of the additional expense deductions \$ 296.71 Copy line 37, All of the deductions for debt payment +\$ 1,683.22 4,890.12 4,890.12 Total deductions..... \$ Copy total here=>

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Debtor 1	Anay	rang			Case r	numbei	(If known) 19-	21620	
Part 2:	Dete	ermine You	r Disposable Income Under 1	1 U.S.C. § 1325(b)(	2)				
			rent monthly income from line Current Monthly Income and (					\$	5,654.63
<b>ch</b> dis red	nildren. sability p ceived i	The monthloayments for accordance	ly necessary income you reco y average of any child support or a dependent child, reported in one with applicable nonbankrupt anded for such child.	payments, foster can Part I of Form 1220	re payments, or C-1, that you	\$_	0.	00	
em in	nployer 11 U.S.	withheld fro C. § 541(b)	etirement deductions. The more manages as contributions for q (7) plus all required repayments § 362(b)(19).	ualified retirement pl	lans, as specified	\$	464.:	24	
42. <b>To</b>	tal of a	II deductio	ns allowed under 11 U.S.C. §	<b>707(b)(2)(A).</b> Copy	line 38 here=>	\$	4,890.	12	
ex the	penses eir expe	and you ha nses. You r	al circumstances. If special ci tive no reasonable alternative, country give your case trustee a documentation for the expenses.	lescribe the special of etailed explanation of	circumstances and				
Descr	ibe the	special cir	cumstances		Amount of expens	se			
				\$					
				\$					
				\$					
				Total \$		Copy here=		0.00	
44. <b>To</b>	otal adji	ustments. /	Add lines 40 through 43.		=> \$		5,354.36	Copy here=> -\$	5,354.36
45. <b>C</b> a	alculate -	your mon	thly disposable income unde	r § 1325(b)(2). Subt	ract line 44 from line	e 39.		\$	300.27
Part 3:	Cha	nge in Inco	ome or Expenses						
ha tim yo	ive char ne your ou filed y	nged or are case will be our petition	or expenses. If the income in F virtually certain to change after to open, fill in the information beto, check 122C-1 in the first column when the increase occurred,	the date you filed yo ow. For example, if mn, enter line 2 in th	our bankruptcy petit the wages reported e second column, e	tion a I incre	nd during the ased after		
Form		Line	Reason for change		Date of change		ncrease or lecrease?	Amount of change	•
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	2C-2 2C-1 2C-2 2C-1					_ [ _ [ _ [	Increase Decrease Increase Decrease Increase Decrease Decrease	\$ \$ \$	_
☐ 122 ☐ 122							Increase Decrease	\$	_

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Debtor 1	Andy Fang	Ca	ase number ( <i>if known</i> )	19-21620
Part 4:	Sign Below			
1	By signing here, under penalty of perjury you	declare that the information on this statem	nent and in any atta	achments is true and correct.
	In I Am des Form			
X	/s/ Andy Fang			
	Andy Fang Signature of Debtor 1			
Date	May 20, 2019			
	MM / DD / YYYY			
I				

Debtor 1 Andy Fang Case number (if known) 19-21620

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2018 to 03/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Fitness International

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\,\frac{\\$3,809.06}{\}\$ from check dated \$\,\frac{\}{2/30/2018}\$. Ending Year-to-Date Income: \$\,\frac{\}{5,089.06}\$ from check dated \$\,\frac{\}{12/31/2018}\$.

This Year:

Current Year-to-Date Income: \$900.00 from check dated 3/31/2019 .

Income for six-month period (Current+(Ending-Starting)): **\$2,180.00**.

Average Monthly Income: \$363.33 .

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: PNC Numo, LLC

Income by Month:

6 Months Ago:	10/2018	\$4,852.16
5 Months Ago:	11/2018	\$4,846.16
4 Months Ago:	12/2018	\$4,846.16
3 Months Ago:	01/2019	\$4,854.16
2 Months Ago:	02/2019	\$4,849.16
Last Month:	03/2019	\$7,500.00
	Average per month:	\$5,291.30

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-21620-GLT Doc 15 Filed 05/20/19 Entered 05/20/19 13:46:36 Desc Main Document Page 53 of 54

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Western District of Pennsylvania

In re	Andy Fang		Case No.	19-21620
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPEN	SATION OF ATTORN	NEY FOR DE	BTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept			4,000.00
	Prior to the filing of this statement I have received		\$	2,000.00
	Balance Due		\$	2,000.00
2. \$	310.00 of the filing fee has been paid.			
3. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compen	sation with any other person un	less they are memb	pers and associates of my law firm.
ļ	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
<b>6.</b> ]	In return for the above-disclosed fee, I have agreed to reno	ler legal service for all aspects of	of the bankruptcy c	ase, including:
t c	a. Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, statenge. Representation of the debtor at the meeting of creditors d. [Other provisions as needed]	nent of affairs and plan which m	nay be required;	
7. I	By agreement with the debtor(s), the above-disclosed fee of All provisions of the retainer agreement e shall be billed at an hourly rate of \$300.00 billed at a 1/10th hour. The attorney's feet the retainer to be paid through your Chap \$4,000.00. Should the hourly attorney's fee application for additional attorney's fees fee the Chapter 13 Plan in order to pay these	xecuted by counsel and de for Attorney Herron, \$250. s will be billed first from the ter 13 Plan up to the currer es exceed \$4,000.00, Client lied with the Court by Firm	btor are incorpo 00 for Attorneys e above-request htly Court appro t hereby agrees . Client also ag	Hanak and Buchanan, and ed intitial retainer as well as ved "no-look" fee of and consents to any rees to the modification of
		CERTIFICATION		
	certify that the foregoing is a complete statement of any a ankruptcy proceeding.	agreement or arrangement for pa	ayment to me for re	epresentation of the debtor(s) in
	lay 20, 2019	/s/ Matthew M. Herr	~	
$D_{i}$	ate	Matthew M. Herron Signature of Attorney	88927	
		The Debt Doctors,		
		607 College Street,		
		Pittsburgh, PA 1523 412-395-6001 Fax:		
		mmh@thedebtdoct		

Name of law firm

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## United States Bankruptcy Court Western District of Pennsylvania

		· · · · · · · · · · · · · · · · · · ·			
In re	Andy Fang		Case No.	19-21620	
		Debtor(s)	Chapter	13	

### **VERIFICATION OF CREDITOR MATRIX**

The abo	ove-named Debtor hereby verif	ries that the attached list of creditors is true and correct to the best of his/her knowledge.
Date:	May 20, 2019	/s/ Andy Fang
		Andy Fang
		Signature of Debtor